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CONFIRMATION NO. 2451

|                             |                                       |              |                        |                     |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------|
| SERIAL NUMBER<br>10/765,772 | FILING DATE<br>01/26/2004<br><br>RULE | CLASS<br>174 | GROUP ART UNIT<br>2841 | ATTORNEY DOCKET NO. |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------|

APPLICANTS *HN*  
 Gabe Cherian, Sun Valley, ID;

\*\* CONTINUING DATA \*\*\*\*\* *HN* \*\*\*\*\*  
 This appln claims benefit of 60/443,128 01/27/2003

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *HN* \*\*\*\*\*  
*NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/03/2004

|   |                           |                         |                       |                            |
|---|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR<br>COUNTRY<br>ID | SHEETS<br>DRAWING<br>92 | TOTAL<br>CLAIMS<br>21 | INDEPENDENT<br>CLAIMS<br>4 |
|---|---------------------------|-------------------------|-----------------------|----------------------------|

35 USC 119 (a-d) conditions met ☐ yes ☒ no ☐ Met after Allowance

Verified and Acknowledged *HN*  
 Examiner's Signature Initials

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TITLE  
 Oriented connections for leadless and leaded packages

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>502 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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